PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| Effective December 8, 2004 | | | | | | | 10/576081 | | | | |
|---|--|---|-----------------|---|---|---------------------|------------------------|------------|---------------------|---|--|
| | | CLAIMS | | D - PART I | (Column 2) | SMALL ENT | | OR | OTHER | THAN | |
| U.S. NATIONAL STAGE FEES | | | | | | RATE | FEE | | RATE | FEE | |
| BASIC FEE | | | | | | BASIC FEE | | OR | BASIC FEE | 300 | |
| EXAMINATION FEE | | | | | | EXAM. FEE | | 1 | EXAM. FEE | 200 | |
| SEARCH FEE | | | | | | SEARCH FEE | | | SEARCH FEE | 1/10 | |
| FEE FOR EXTRA SPEC. PGS. | | | 1 | ninus 100 = | / 50 = | X \$ 125 = | | 1 | X \$ 250 = | 100 | |
| TOTAL CHARGEABLE CLAIMS | | | 20 | minus 20 = * | | X \$ 25 = | · | OR | X \$ 50 = | | |
| INDEPENDENT CLAIMS | | | 1 | minus 3 = * | | X \$ 100 = | | OR | X \$ 200 = | | |
| MULTIPLE DEPENDENT CLAIM PRE | | | ESENT | | | + \$ 180 = | | OR | + \$ 360 = | / | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOTAL | | OR | TOTAL | 900 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST | | | | | OTHER THAN SMALL ENTITY OR SMALL ENTITY | | | | | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | · | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | = | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | = | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | + \$ 180 = | | OR | + \$ 360 = | | | |
| | | | | | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. | | |
| | | (Column 1) | | (Column 2) | (Column 3) | | | | · | | |
| X I | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | = | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | = | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | 1 🗆 | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | TOTAL ADDIT. | | OR L | TOTAL ADDIT. FFF | | |
| * | If the entry in col | umn 1 is less than th | e entry in colu | mn 2. write "0" in colúr | 2 | • • | | | | | |

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.